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Please type a plus sign (+) inside this box		Approved to a collection of informers	PTO/SB/21 (08-00) oved for use through 10/31/2002 OMB 0651-0031— mark Office: U.S. DEPÄRTMENT OF COMMERCE
		Application Number	09/667,971
TRANSMIT	TAĻ	Filling Date	09/25/2000
FORM (to be used for all correspondence after initial filing)		First Named Inventor	HULSTEDT
		Group Art Unit	3724
	· · · · · · · · · · · · · · · · · · ·	Examiner Name	FLORES-SANCHEZ
Total Number of Pages in This Subn		Attomey Docket Numbe	
	ENCL	OSURES (check	all that apply)
X Fee Transmittal Form (1 page) X Fee Attached X Amendment / Reply (1 page); After Final Affidavits/declaration(s) X Extension of Time Request (1 page) Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing Licensing Petition Provision Power of Change Address Terminal Request	to Convert to a nal Application of Correspondence	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Repty Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below):
SIGNATU	RE OF APPLIC	CANT, ATTORNEY, OR A	AGENT
.Firm or			
Individual name Keith Frantz			
Signature Ketty	1 Fr	ing	
Date 5- 2	9-07		
	CERTIFICA	TE OF MAILING	
I hereby certify that this correspondence is being a mail in an envelope addressed to: Commissioner	deposited with the	United States Postal Service	e with sufficient postage as first class

Typed or printed name Keith Frantz Signature

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	460.	00
₹,	300.	\circ

Complete if Known						
Application Number	09/667,971	ر، الا				
Filing Date	09/25/2000	2	- 7			
First Named Inventor	HULSTEDT	- 	رئ			
Examiner Name	FLORES-SANCHEZ	3.7	رين,			
Group Art Unit	3724		, <u>2</u> 5			
Attorney Docket No.		- 2	?.			

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)							
X Check	Credit c	ard Money	Other None	3. /	ADDIT	ION	AL FI	EES		
Deposit	Account.	Order		Large	e Entity	/ Sm	all Enti	ty		
Deposit Account				Fee Cod		Fee			Fee Paid	
Number	<u> </u>	·		105	130	205	65	Surcharge - late filing fee or oath		
Deposit Account Name				127	50	227	25	Surcharge - late provisional filing fee or cover sheet		
11 1		horized to: (check al	•	139	130	139	130	Non-English specification		
	(s) indicated	_	it any overpayments	147	2,520	147	2,520	For filing a request for ex parte reexamination.		
			ency of this application	112	920*	ŀ	920*	Requesting publication of SIR prior to		
		below, except for th	e tiling tee	l				Examiner action		
to the above-identified deposit account. FEE CALCULATION			113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action			
1. BASIC F				115	110	215	55	Extension for reply within first month		
Large Entity		_		116	400	216	200	Extension for reply within second month		
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description	Fee Paid	117	920	217	460	Extension for reply within third month	460	
101 740	201 370	Utility filing fee	7007210	118	1,440	218	720	Extension for reply within fourth month		
106 330	206 165	Design filing fee		128	1,960	228	980	Extension for reply within fifth month		
107 510	207 255	Plant filing fee		119	320	219	160	Notice of Appeal		
108 740	208 370	Reissue filing fee	·	120	320	220	160	Filing a brief in support of an appeal		
114 160	214 80	Provisional filing	fee	121	280	221	140	Request for oral hearing		
'		SUBTOTAL (1)	(\$)	138	1,510	138	1,510	Petition to institute a public use proceeding		
2 EVTD4 (N A 134 EE		<u> </u>	140	110	240	55	Petition to revive - unavoidable		
Z. EXTRA (LAIM FE	1	AND REISSUE		1,280	241	640	Petition to revive - unintentional		
T	<u> </u>	Extra Claims	below Fee Paid		1,280	_	640	Utility issue fee (or reissue)		
Total Claims Independent	==	3** =		143	460	243	230	Design issue fee		
Claims Multiple Deper		° - L ^ }		144	620	244	310	Plant issue fee		
		L		122	130	122	130	Petitions to the Commissioner		
Large Entity	Small Enti	ty		123 126	50 180	123 126	50 180	Processing fee under 37 CFR 1.17(q)		
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Descript	<u>on</u>					Submission of Information Disclosure Stmt		
103 18	203 9	Claims in exces	s of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)		
102 84	202 42	•	ms in excess of 3	146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))		
104 280	204 140		ent claim, if not paid	149	740	249	370	For each additional invention to be	——	
109 84	209 42	** Reissue inder over original p			, ,,		0.0	examined (37 CFR § 1.129(b))		
110 18	210 9	** Reissue clain and over origi	ns in excess of 20	179	740	279	370	Request for Continued Examination (RCE)		
		and over ongi	ear patein	169	900	169	900	Request for expedited examination of a design application		
	SI	JBTOTAL (2)	(\$)	Other	fee (sp	ecify)			
**or number	previousty p	aid, if greater; For Re	eissues, see above	*Red	uced by	Basi	c Filing	Fee Paid SUBTOTAL (3) (\$) 4	60	

SUBMITTED BY		Complete (il applicable)			
Name (Print/Type)	Keith Frantz	Registration No. (Attorney/Agent)	37828	Telephone	815-987-982
Signature	Kert Fran	A		Date	5-29-02

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